Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MISSOURI	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on government-issued ure identification (for mple, your driver's ase or passport).  g your picture tification to your sting with the trustee.	Stephanie First name  Nicole Middle name  Walker Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All duse	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-9809	

Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Pg 2 of 65

Case number (if known)

Debtor 1 Stephanie Nicole Walker

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		2169 Orbitt Dr Saint Louis, MO 63136 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Saint Louis County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Stephanie Nicole Walker

Case number (if known)

7. The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
choosing to file under	☐ Chap	oter 7					
	☐ Chap	oter 11					
	☐ Chap	ter 12					
	■ Chap	oter 13					
3. How you will pay the fee	ab ord	out how yo	u may pay. Typical attorney is submitti	ly, if you are paying	the fee yoursel	f, you may pay with cash	r local court for more detail n, cashier's check, or mone h a credit card or check wit
				ments. If you choose Official Form 103A).	this option, sig	gn and attach the <i>Applic</i> a	ation for Individuals to Pay
	□ Ire	equest tha	t my fee be waive	d (You may request			pter 7. By law, a judge may
	ар	plies to you	ır family size and y	ou are unable to pay	the fee in insta	allments). If you choose	of the official poverty line the this option, you must fill out
	tne	э Аррисатс	n to Have the Cha <sub>l</sub>	oter / Filing Fee wa	ivea (Official Fo	orm 103B) and file it with	i your petition.
Have you filed for bankruptcy within the	□ No.						
last 8 years?	Yes.						
		District	EDMO	When	6/09/15	Case number	15-44341
		District		When		Case number	
		District		When		Case number	
0. Are any bankruptcy	■ No						
cases pending or being filed by a spouse who is	☐ Yes.						
not filling this case with you, or by a business partner, or by an affiliate?							
		Debtor				Relationship to y	you
		District		When		Case number, if	known
		Debtor				Relationship to y	you
		District		When		Case number, if	known
11. Do you rent your	■ No.	Go to li	ne 12.				
residence?	☐ Yes.	Has yo	ur landlord obtaine	d an eviction judgme	ent against you	?	
			No. Go to line 12.		-		
				Statement About an	Eviction Judan	ment Against You (Form	101A) and file it as part of
			Yes. Fill out <i>Initial</i> this bankruptcy pe		Eviction Judgr	ment Against You (Form	101A) and f

Debtor 1 Stephanie Nicole Walker Pg 4 of 65 Case number (if known)

Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code			
	it to this petition.		Check	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approphilines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procuus. C. 1116(1)(B).					
	For a definition of small	No.	I am r	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	debtor, see 11		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any							
	property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
a.gom ropano.					Number, Street, City, State & Zip Code			

Debtor 1 Stephanie Nicole Walker

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Pa 6 of 65 Debtor 1 Case number (if known) **Stephanie Nicole Walker** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." vou have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million

### Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Stephanie Nicole Walker Stephanie Nicole Walker Signature of Debtor 1	Signature of Debtor 2		
Executed on January 31, 2020  MM / DD / YYYY	Executed on MM / DD / YYYY		

Debtor 1 Stephanie Nicole Walker

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael Toscano	Date	January 31, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Michael Toscano		
Printed name		
Toscano & Wilson Law LLC		
Firm name		
10880 Baur Blvd		
Saint Louis, MO 63132		
Number, Street, City, State & ZIP Code		
Contact phone (314) 801-1335	Email address	courts@twlawstl.com
61483MO MO		
Bar number & State		

			Pg 8 of 65				
Fill in this infor	mation to identify your	case:					
Debtor 1	1 Stephanie Nicole Walker						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	)F MISSOURI				
Case number (if known)					☐ Check if this is an amended filing		
_					_		

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	90,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,410.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	107,410.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	99,583.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	4,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	42,515.00
	Your total liabilities	\$	146,098.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,850.43
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,665.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

Debtor 1 Stephanie Nicole Walker Pg 9 of 65 Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_4,555.38

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	22,793.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	26,793.00

	Case 20	-40540	Doc 1 File	ed <b>01</b> .	/31/20	Entered 01/31/20 1	.4:36:13	Main	Document
Fill in	this informatio	n to identify	your case and th	nis filing		10-01-05			
Debto	r1 S	tephanie N	icole Walker						
		rst Name		e Name		Last Name			
Debto Spouse		rst Name	Middle	e Name		Last Name			
Jnited	d States Bankrup	otcv Court for	the: EASTERN	DISTRI	CT OF MIS	SSOURI			
		,							_
ase	number								Check if this is a amended filing
	cial Form nedule <i>F</i>		-						12/15
nswei	every question.  Describe Each	Residence, Bu	uilding, Land, or Ot	ther Real	Estate You	o the top of any additional pages,  Own or Have an Interest In  ng, land, or similar property?	, , , , , , , , , , , , , , , , , , , ,		
_ `	lo. Go to Part 2.	,		,	J. 100, 2011	ng, ama, er emmar property :			
	es. Where is the p	a wa ma a wha s O							
_	2169 Orbitt Dr. Street address, if avails	-	cription	What	Single-fam Duplex or r Condomini	erty? Check all that apply illy home multi-unit building ium or cooperative red or mobile home	the amount of Creditors Who	any secured o Have Clain	ims or exemptions. Put I claims on <i>Schedule D:</i> as Secured by Property.
5	Saint Louis	MO	63136-0000		Land		Current value entire proper		Current value of the portion you own?
C	City	State	ZIP Code		Investment	• • •	\$90	,000.00	\$90,000.0
				Uho I	Timeshare Other  has an inter	rest in the property? Check one		simple, tena	our ownership interest ancy by the entireties, c
				_	Debtor 1 or	•	Fee Simple	е	
_	Saint Louis County				Debtor 2 or	•			
	, our ty					nd Debtor 2 only e of the debtors and another	☐ Check if (see instru		munity property
					informatio	n you wish to add about this item cation number:	n, such as loca	I ,	
						es from Part 1, including any			\$90,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

page 1 Official Form 106A/B Schedule A/B: Property

Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document
Pg 11 of 65
Case Number (# known)

Debi	101 1 <u>5</u>	tepnanie N	icole walker		Case number (if known)	
3. <b>C</b> a	ars, vans,	trucks, tract	ors, sport utility ve	hicles, motorcycles		
П	No			•		
	Yes					
-	res					
3.1	Make:	Nissan		Who has an interest in the property? Check one		ured claims or exemptions. Put
3.1	Model:	Altima		Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2012		Debtor 1 only  Debtor 2 only		
		nate mileage:	150,000	Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
	Other inf	formation:		☐ At least one of the debtors and another		
				Check if this is community property (see instructions)	\$4,000	.00 \$4,000.00
5 A .p. Part Do y	3: Descri	be Your Perso or have any lo	ed for Part 2. Write nal and Household It egal or equitable in	terest in any of the following items?		\$4,000.00  Current value of the portion you own?  Do not deduct secured claims or exemptions.
	l No l Yes. De	scribe	Household goo	ds		\$1,100.00
			Ammillianasa			\$250.00
			Applliances			\$250.00
E	•	Televisions and including cell		eo, stereo, and digital equipment; computers, prii nedia players, games	nters, scanners; music co	ollections; electronic devices
						<u> </u>
E	xamples:	other collection	figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other illectibles	art objects; stamp, coin,	or baseball card collections;
E	xamples:	musical instru	graphic, exercise, ar	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	and kayaks; carpentry tools;
- 1	lVac Da	SCRING				

Official Form 106A/B Schedule A/B: Property

Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document
Pg 12 of 65
Case number (if known)

Deb	otor 1 Stephanie I	Nicole Walker	Pg 12 0f 65	Case number (if known)	
10.	Firearms Examples: Pistols, rifle	es, shotguns, ammunition	n, and related equipment		
	■ No □ Yes. Describe				
_	<b>Clothes</b> Examples: Everyday o ☑ No	clothes, furs, leather coat	ts, designer wear, shoes, accessories		
	Yes. Describe				
		Clothing			\$150.00
	<b>Jewelry</b> <i>Examples:</i> Everyday j  ☑ No ☑ Yes. Describe	ewelry, costume jewelry,	engagement rings, wedding rings, heirloom jo	ewelry, watches, gems, g	old, silver
		Costume jewelry			\$200.00
13.	Non-farm animals				
	Examples: Dogs, cats  No  Yes. Describe	, birds, horses			
		nd household items vo	u did not already list, including any health	aids you did not list	
_	No	na nousenoia nems ye	a did not already not, morading any nearth	alas you ala not not	
	☐ Yes. Give specific in	nformation			
15.			rom Part 3, including any entries for pages	you have attached	\$2,400.00
<b>D</b> . (	Barrier Warren			L	
	24: Describe Your Fina you own or have any		est in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
•	No		our home, in a safe deposit box, and on hand	l when you file your petitic	on
	institutions		al accounts; certificates of deposit; shares in c counts with the same institution, list each.	credit unions, brokerage h	nouses, and other similar
	□ No ■ Yes		Institution name:		
		17.1. Checking	St. Louis Community Cred	it Union	\$9.00
		17.2. <b>Savings</b>	St. Louis Community Cred	it Unon	\$1.00
_		, or publicly traded stors, investment accounts w	cks vith brokerage firms, money market accounts		
	■ N0 ☑ Yes	Institution or i	ssuer name:		

Official Form 106A/B Schedule A/B: Property page 3

Pg 13 of 65 Debtor 1 Case number (if known) Stephanie Nicole Walker 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No ■ Yes. Give specific information about them..... Name of entity: % of ownership: **Event Planning - Joiner & Walker LLC - Inventory** 100 \$1,000.00 % (party supplies) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **Retirement Account** \$10.000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 4

De	ebtor 1	Stephanie Nicole Walker	Pg 14 o	Case number (if known)	
	Exam ■ No	, , , , , , , , , , , , , , , , , , , ,	usal support, child support, r	maintenance, divorce settlement, property	settlement
	⊔ Yes.	Give specific information			
		amounts someone owes you bles: Unpaid wages, disability insurance benefits; unpaid loans you made to		, sick pay, vacation pay, workers' compe	nsation, Social Security
	_	Give specific information			
31.		sts in insurance policies oles: Health, disability, or life insurance; I	health savings account (HSA	s); credit, homeowner's, or renter's insural	nce
	_	Name the insurance company of each p Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	If you some	terest in property that is due you from are the beneficiary of a living trust, expendence has died.  Give specific information		ance policy, or are currently entitled to rec	eive property because
	Exam ■ No	s against third parties, whether or not bles: Accidents, employment disputes, in Describe each claim			
	■ No	contingent and unliquidated claims of  Describe each claim	every nature, including co	ounterclaims of the debtor and rights to	o set off claims
	■ No	nancial assets you did not already list  Give specific information			
36		the dollar value of all of your entries fr art 4. Write that number here	rom Part 4, including any e	ntries for pages you have attached	\$11,010.00
Pa	rt 5: De	scribe Any Business-Related Property You	Own or Have an Interest In. L	ist any real estate in Part 1.	
_		own or have any legal or equitable interest o to Part 6.	in any business-related prope	rty?	
[	☐ Yes. (	Go to line 38.			
Pa		scribe Any Farm- and Commercial Fishing- rou own or have an interest in farmland, list it in		Have an Interest In.	
46.	■ No.	u own or have any legal or equitable in Go to Part 7. Go to line 47.	nterest in any farm- or com	mercial fishing-related property?	
Pa	rt 7:	Describe All Property You Own or Have a	an Interest in That You Did No	t List Above	
	Do yo	u have other property of any kind you	did not already list?		

■ No

☐ Yes. Give specific information.......

Pg 15 of 65 Debtor 1 Stephanie Nicole Walker Case number (if known) 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$90,000.00 Part 2: Total vehicles, line 5 \$4,000.00 Part 3: Total personal and household items, line 15 57. \$2,400.00 Part 4: Total financial assets, line 36 58. \$11,010.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$17,410.00 Copy personal property total \$17,410.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$107,410.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor				
Debtor 1	Stephanie Nicole			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF MISSOURI	
Case number _ (if known)				☐ Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	Check one only,	even if your s	spouse is filing w	ith you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ne Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2169 Orbitt Dr. Saint Louis, MO 63136 Saint Louis County	\$90,000.00		\$0.00	RSMo § 513.475
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2012 Nissan Altima 150,000 miles	\$4,000.00		\$0.00	RSMo § 513.430.1(5)
Line Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	
Household goods Line from Schedule A/B: 6.1	\$1,100.00		\$1,100.00	RSMo § 513.430.1(1)
Ellie Holli Gonedale A.E. G. 1			100% of fair market value, up to any applicable statutory limit	
Applliances Line from Schedule A/B: 6.2	\$250.00		\$250.00	RSMo § 513.430.1(1)
Ellie Holli Goredale A.E. G.E			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$700.00		\$700.00	RSMo § 513.430.1(1)
Ello IIom Johndale 74 B. 111			100% of fair market value, up to any applicable statutory limit	

# Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Pg 17 of 65 Case number (if known)

De	Stephanie Nicole Walker				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Clothing Line from Schedule A/B: 11.1	\$150.00	■	\$150.00  100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(1)
	Costume jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	RSMo § 513.430.1(2)
	Zine nem conedule / v.b. 1211			100% of fair market value, up to any applicable statutory limit	
	Checking: St. Louis Community Credit Union	\$9.00		\$9.00	RSMo § 513.430.1(3)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings: St. Louis Community Credit Unon	\$1.00		\$1.00	RSMo § 303.40
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Event Planning - Joiner & Walker LLC - Inventory (party supplies)	\$1,000.00		\$591.00	RSMo § 513.430.1(3)
	100 % ownership Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit	
	401(k): Retirement Account Line from Schedule A/B: 21.1	\$10,000.00		\$10,000.00	RSMo § 513.430.1(10)(f)
	Zine nem coneduie / v.z. z · · ·			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3  No			led on or after the date of adjustmen	it.)
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case?	?
	□ No				

Ca	se 20-40540 Do		01/31/20 14:36	:13 Main Doc	ument
Fill in this inf	ormation to identify you	Pg 18 of 65			
	<u> </u>				
Debtor 1	Stephanie Nicol	le Walker  Middle Name  Last Name			
Debtor 2	riistivame	Windle Name Last Name			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF MISSOURI			
Case number					
(if known)				_	if this is an
				amend	ded filing
Official Fo	rm 106D				
		Who Hove Claims Coours	d by Droport		40/45
<u>Scheaui</u>	e D: Creditors	Who Have Claims Secured	a by Propert	<u>y                                    </u>	12/15
	the Additional Page, fill it	If two married people are filing together, both are eq out, number the entries, and attach it to this form. O			
1. Do any credit	ors have claims secured by	y your property?			
☐ No. Ch	eck this box and submit t	his form to the court with your other schedules. Y	ou have nothing else t	o report on this form.	
_	ill in all of the information	•		- · · · · · · · · · · · · · · · · · · ·	
		below.			
	t All Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Consu	mer Portfolio Svc	Describe the property that secures the claim:	value of collateral. <b>\$6,194.00</b>	claim \$4,000.00	If any <b>\$2,194.00</b>
Creditor's N		2012 Nissan Altima 150,000 miles	Ψο,το που	Ψ 1,000.00	<u> </u>
	ankruptcy	As of the date you file, the claim is: Check all that			
Po Box		apply.			
	CA 92619	Contingent			
Number, S	treet, City, State & Zip Code	☐ Unliquidated			
Who owes the	e debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 onl		☐ An agreement you made (such as mortgage or sec	cured		
Debtor 1 onl	•	car loan)	Ju. 34		
Debtor 1 and	•	☐ Statutory lien (such as tax lien, mechanic's lien)			
	of the debtors and another	☐ Judgment lien from a lawsuit			
	s claim relates to a	Other (including a right to offset)			

community debt

Date debt was incurred Active 12/19

6371

Last 4 digits of account number

Opened 10/15 Last

Debtor 1	Stephanie Nicole Walke	r	Case number (if known)		
	First Name Middle Na	ame Last Name	-		
2.2   _ 1	ome Point Financial		\$02.280.00	\$90,000.00	\$3,389.00
Co	orporation	Describe the property that secures the claim:	\$93,389.00	——————————————————————————————————————	<b>\$3,369.00</b>
	editor's Name	2169 Orbitt Dr. Saint Louis, MO			
_	tn: Correspondence	63136 Saint Louis County			
	ept	As of the date you file, the claim is: Check all that			
	511 Luna Road; Suite	apply.			
20	•	☐ Contingent			
	ermers Branch, TX 5234				
Nun	mber, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who ow	es the debt? Check one.	Nature of lien. Check all that apply.			
■ Debto	or 1 only	☐ An agreement you made (such as mortgage or	secured		
☐ Debto	. ,	car loan)			
_	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
	st one of the debtors and another	☐ Judgment lien from a lawsuit	,		
	k if this claim relates to a	☐ Other (including a right to offset)			
	munity debt	Other (including a right to onset)			
	-				
	Opened				
	05/18 Last	400	•		
Date deb	ot was incurred Active 12/19	Last 4 digits of account number 108	· · · · · · · · · · · · · · · · · · ·		
				_	
Add the	e dollar value of your entries in Co	olumn A on this page. Write that number here:	\$99,583.0	0	
		the dollar value totals from all pages.	\$99,583.0	0	
write tr	hat number here:		<b>,</b>		
Part 2:	List Others to Be Notified fo	r a Debt That You Already Listed			
		e notified about your bankruptcy for a debt that y			
		we to someone else, list the creditor in Part 1, an you listed in Part 1, list the additional creditors			
	Part 1, do not fill out or submit th		nere. If you do not have addition	iai persons to be noti	neu ioi any
	·	. •			
□ <sub>Na</sub>	ame, Number, Street, City, State & Z	Zip Code On v	which line in Part 1 did you enter t	he creditor? 2.1	
C	onsumer Portfolio Svc	·			
19	9500 Jamboree Rd	Last	t 4 digits of account number		
Ir	vine, CA 92612				
∐ <sub>Na</sub>	ame, Number, Street, City, State & 2	Zip Code	which line in Part 1 did you enter t	the creditor? 22	
	ome Point Financial Corpo	·	willon line in Fart 1 did you enter i	ne oreunor:	
48	849 Greenville Avenue	Lasi	t 4 digits of account number		
D	allas, TX 75206		<del>-</del>		

		D~				
Fill in this inf	ormation to identify your cas		20 of 65			
Debtor 1	Stephanie Nicole W	alker				
20010.	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the: _E	EASTERN DISTRICT OF M	IISSOURI			
Case number						
(if known)					☐ Check amend	if this is an ed filing
Official Ea	400E/E					
	orm 106E/F E/F: Creditors Wh	o Have Unsecure	d Claims			12/15
any executory o Schedule G: Ex Schedule D: Cre	and accurate as possible. Use F contracts or unexpired leases that ecutory Contracts and Unexpired editors Who Have Claims Secure	at could result in a claim. Als d Leases (Official Form 106G	so list executory control i). Do not include any o	acts on Schedule A/B: P reditors with partially so art you need, fill it out, n	roperty (Official For ecured claims that a number the entries in	n 106A/B) and on re listed in the boxes on the
		If you have no information to		t file that Part. On the to	op of any additional	Jages, write your
name and case	number (if known).	•		t file that Part. On the to	op of any additional	Jages, write your
Part 1: Lis	number (if known). t All of Your PRIORITY Unse	cured Claims		t file that Part. On the to	op of any additional	
Part 1: Lis  1. Do any cre	number (if known). t All of Your PRIORITY Unse ditors have priority unsecured c	cured Claims		t file that Part. On the to	pp of any additional	Jages, write your
Part 1: Lis	number (if known). t All of Your PRIORITY Unse ditors have priority unsecured c	cured Claims		t file that Part. On the to	p or any additional	oages, write your
Part 1: Lis  1. Do any cre  No. Go  Yes.  2. List all of y identify wha possible, lis Part 1. If mo	number (if known). t All of Your PRIORITY Unse ditors have priority unsecured c	cured Claims claims against you?  If a creditor has more than one poth priority and nonpriority amore cording to the creditor's name cular claim, list the other creditor	priority unsecured claim bunts, list that claim here. If you have more than in Part 3.	list the creditor separatel and show both priority ar two priority unsecured cla	y for each claim. For nd nonpriority amount nims, fill out the Contir	each claim listed, s. As much as uation Page of
Part 1: Lis  1. Do any cre  No. Go  Yes.  2. List all of y identify wha possible, lis Part 1. If mo	number (if known).  It All of Your PRIORITY Unsertions have priority unsecured of the Part 2.  Tour priority unsecured claims. If at type of claim it is. If a claim has but the claims in alphabetical order a pore than one creditor holds a particular to the content of the priority unsecured claims in alphabetical order a particular than one creditor holds a particular than one creditor than one cre	cured Claims claims against you?  If a creditor has more than one poth priority and nonpriority amore cording to the creditor's name cular claim, list the other creditor	priority unsecured claim bunts, list that claim here. If you have more than in Part 3.	list the creditor separatel and show both priority ar two priority unsecured cla	y for each claim. For nd nonpriority amount	each claim listed, s. As much as
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Part 1: Lis  1. Do any cre No. Go of Yes.  2. List all of y identify what possible, list Part 1. If my (For an exposted Philate Number Who incut Debtor Debtor List List List List List List List List	number (if known).  It All of Your PRIORITY Unseditors have priority unsecured control of the Part 2.  It type of claim it is. If a claim has been the claims in alphabetical order a part than one creditor holds a particular lanation of each type of claim, see and Revenue Service of Creditor's Name and Revenue And Revenu	f a creditor has more than one poth priority and nonpriority ame according to the creditor's name cular claim, list the other credito the instructions for this form in  Last 4 digits of according to the was the debter of the date you  Contingent Unliquidated	priority unsecured claim bunts, list that claim here. If you have more than rs in Part 3. the instruction booklet.	list the creditor separatel and show both priority at two priority unsecured cla  Total claim  \$4,000.00	y for each claim. For nd nonpriority amount nims, fill out the Contir Priority amount	each claim listed, s. As much as uation Page of Nonpriority amount
name and case  Part 1: Lis  1. Do any cre  No. Got  Yes.  2. List all of y identify wha possible, lis Part 1. If me (For an exp  2.1 International Priority PO B Phila Numbe Who incu	number (if known).  It All of Your PRIORITY Unsertions have priority unsecured control to Part 2.  It type of claim it is. If a claim has been the claims in alphabetical order a part than one creditor holds a particular lanation of each type of claim, see of Creditor's Name for 7346 and 1910 ar Street City State Zip Code corred the debt? Check one.	f a creditor has more than one poth priority and nonpriority ame according to the creditor's name atlar claim, list the other credito the instructions for this form in  Last 4 digits of according to the date you  As of the date you  Contingent  Unliquidated  Disputed	priority unsecured claim bunts, list that claim here. If you have more than ors in Part 3. the instruction booklet. count number tincurred? file, the claim is: Checumsecured claim:	list the creditor separatel and show both priority at two priority unsecured cla  Total claim  \$4,000.00	y for each claim. For nd nonpriority amount nims, fill out the Contir Priority amount	each claim listed, s. As much as uation Page of Nonpriority amount
name and case  Part 1: Lis  1. Do any cre  No. Go for the light of the	number (if known).  It All of Your PRIORITY Unservice ditors have priority unsecured on Part 2.  It type of claim it is. If a claim has been the claims in alphabetical order a pretent on the claims in alphabetical order a pretent of each type of claim, see the claim of each type of claim, see the claim of each type of claim, see the control of each type of claim, see the claim of each type of claim of	f a creditor has more than one poth priority and nonpriority ame according to the creditor's name atlar claim, list the other credito the instructions for this form in  Last 4 digits of according to the date you  As of the date you  Contingent  Unliquidated  Disputed  Type of PRIORITY	priority unsecured claim bunts, list that claim here. If you have more than ors in Part 3. the instruction booklet. count number tincurred? file, the claim is: Checumsecured claim:	list the creditor separatel and show both priority at two priority unsecured class and claim \$4,000.00	y for each claim. For nd nonpriority amount nims, fill out the Contir Priority amount	each claim listed, s. As much as uation Page of Nonpriority amount
name and case  Part 1: Lis  1. Do any cre  No. Go of Yes.  2. List all of y identify what possible, list Part 1. If my (For an exp  2.1 Interior Priority PO B Philaton Number Who incutor Debtor Debtor At least Checkers	number (if known).  It All of Your PRIORITY Unsertiditors have priority unsecured control to Part 2.  It type of claim it is. If a claim has been the claims in alphabetical order a particular than one creditor holds a particular than	f a creditor has more than one poth priority and nonpriority ame according to the creditor's name atlar claim, list the other credito the instructions for this form in  Last 4 digits of according to the date you  As of the date you  Contingent  Unliquidated  Disputed  Type of PRIORITY  Domestic support	priority unsecured claim punts, list that claim here. If you have more than ors in Part 3. the instruction booklet. count number tincurred?	list the creditor separatel and show both priority at two priority unsecured class and claim \$4,000.00	y for each claim. For nd nonpriority amount nims, fill out the Contir Priority amount	each claim listed, s. As much as uation Page of Nonpriority amount
name and case  Part 1: Lis  1. Do any cre  No. Go of Yes.  2. List all of y identify what possible, list Part 1. If my (For an exp  2.1 Interior Priority PO B Philaton Number Who incutor Debtor Debtor At least Checkers	number (if known).  It All of Your PRIORITY Unsertions have priority unsecured comparts.  It type of claim it is. If a claim has been the claims in alphabetical order a priority unsecured responsible to the claims in alphabetical order a priority and creditor holds a particular than one creditor holds a particular attention of each type of claim, see and Revenue Service of Creditor's Name for 7346 and Palon and Palon ar Street City State Zip Code arred the debt? Check one.  It only It and Debtor 2 only attentions and another at if this claim is for a community.	f a creditor has more than one poth priority and nonpriority ame according to the creditor's name atlar claim, list the other credito the instructions for this form in  Last 4 digits of according to the date you  As of the date you  Contingent  Unliquidated  Disputed  Type of PRIORITY  Domestic support	priority unsecured claim bunts, list that claim here. If you have more than rs in Part 3. the instruction booklet. count number t incurred? file, the claim is: Check unsecured claim: rt obligations in other debts you owe to	list the creditor separatel and show both priority at two priority unsecured class and claim \$4,000.00	y for each claim. For nd nonpriority amount nims, fill out the Contir Priority amount	each claim listed, s. As much as uation Page of Nonpriority amount

Debto	Stephanie Nicole Walker	Case number (if known)	
2.2	Missouri Department of Revenue	Last 4 digits of account number \$0.00 \$	\$0.00 \$0.00
	Priority Creditor's Name Taxation Division PO BOX 854	When was the debt incurred?	
	Jefferson City, MO 65105  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
١	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	☐ Unliquidated	
_	Debtor 2 only	<u> </u>	
	Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Disputed  Type of PRIORITY unsecured claim:	
		Domestic support obligations	
_	At least one of the debtors and another		
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
'	Is the claim subject to offset?  ■ No	Claims for death or personal injury while you were intoxicated	
ľ	■ No □ Yes	Other. Specify Priority	
-		<u> </u>	
<b>4. Li</b> ur th	nsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	alphabetical order of the creditor who holds each claim. If a creditor has more tha aim. For each claim listed, identify what type of claim it is. Do not list claims already inc creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
Pa	art 2.		Total claim
4.1	Americash Loans	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO Box 1728	When was the debt incurred?	
	Des Plaines, IL 60016		-
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	■ No	Other. Specify Money Loaned	
	<b>—</b> 103	Utner, Specify initially Education	

Pg 22 of 65 Case number (if known) Debtor 1 Stephanie Nicole Walker 4.2 Last 4 digits of account number \$8,239.00 **Capital One** 2668 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/16 Last Active Po Box 30285 When was the debt incurred? 3/06/19 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Cash For Whatever** Last 4 digits of account number Unknown Nonpriority Creditor's Name 6160 N. Cicero When was the debt incurred? Chicago, IL 60646 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Money Loaned ☐ Yes **Deptartment Store National** \$454.00 Bank/Macy's 6289 4.4 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/18 Last Active Attn: Bankruptcy 9111 Duke Boulevard When was the debt incurred? 12/18 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Charge Account

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Pg 23 of 65 Case number (if known)

Debtor	1 Stephanie Nicole Walker	Py 23 01 05	Case number (if known)	
4.5	Evergreen Services	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name PO Box 834	When was the debt incurred?		
	Lac Du Flambeau, WI 54538  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Money Loa	ned	
4.6	LVNV Funding/Resurgent Capital	Last 4 digits of account number	1204	\$1,371.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 04/19 Last Active 09/18	
	Greenville, SC 29603  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Bank N.A.	Company Account Credit One	
4.7	LVNV Funding/Resurgent Capital	Last 4 digits of account number	6772	\$1,170.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 06/19 Last Active 11/18	
	Greenville, SC 29603  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Factoring ( Other. Specify Bank N.A.	Company Account Credit One	

# Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Pg 24 of 65 Construction (VI)

Case number (if known) Debtor 1 Stephanie Nicole Walker 4.8 \$2,160.00 Midland Fund Last 4 digits of account number 0222 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 03/19** 350 Camino De La Reine Ste 100 San Diego, CA 92108 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** Other. Specify Bank ☐ Yes 4.9 Midland Fund \$904.00 Last 4 digits of account number 7378 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 07/19** 350 Camino De La Reine Ste 100 San Diego, CA 92108 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank 4.1 Midland Fund 5004 \$482.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 06/19** 350 Camino De La Reine Ste 100 San Diego, CA 92108 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacktriangled Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank

Case 20-40540 Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Pg 25 of 65 Case number (if known)

Debtor	1 Stephanie Nicole Walker	Py 25 01 05	Case number ( <sub>if known</sub> )	
4.1	Midland Fund	Land A. P. Marie Communication	7930	\$497.00
1	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ497.00
	Attn: Bankruptcy	When was the debt incurred?	Opened 08/19	
	350 Camino De La Reine Ste 100			
	San Diego, CA 92108		Charles II that ample	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alata.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Factoring C	Company Account Citibank N.A.	
4.1	Naviet	Last 4 digits of account number	0808	\$22,793.00
2	Nonpriority Creditor's Name			Ψ=-,: σσισσ
	Attn: Claims Dept		Opened 08/16 Last Active	
	Po Box 9500	When was the debt incurred?	12/31/19	
	Wilkes-Barr, PA 19773  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.		or choose an unat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement of arreive that yet all not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa	ıl	
4.1	0		0000	<b>\$500.00</b>
3	Second Round, LP  Nonpriority Creditor's Name	Last 4 digits of account number	6238	\$529.00
	Attn: Bankruptcy Dept	When was the debt incurred?	Opened 08/19	
	Po Box 41955			
	Austin, TX 78704	_		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other, Specify Collection		
	<b>□</b> 162	Other, Specify Contection I	ALLOHIES COMETHLY DAILS	

Doc 1 Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Case 20-40540

Pg 26 of 65 Case number (if known) Debtor 1 Stephanie Nicole Walker 4.1 Speedycash.Com 88-Mo Unknown Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box #780408 When was the debt incurred? Wichita, KS 67278 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Money Loaned ☐ Yes 4.1 Syncb/Car Care Carx 1717 Last 4 digits of account number \$678.00 5 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/18 Last Active Po Box 965060 When was the debt incurred? 01/19 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 **Target** 9419 \$480.00 6 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/16 Last Active Attn: Bankruptcy Po Box 9475 When was the debt incurred? 06/19 Minneapolis, MN 55440 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

■ Other. Specify Credit Card

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Pg 27 of 65 Case number (if known) Debtor 1 Stephanie Nicole Walker

4.1 7 Wf/Fmg	Last 4 digits of account number	1659	\$2,758.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10438 Mac F8235-02f Des Moines, IA 50306	When was the debt incurred?	Opened 05/18 Last Active 8/10/18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	ad alaim.	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure  ☐ Student loans	ed Claim:	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	paration agreement or divorce that you did not	
No	Debts to pension or profit-shar	ing plans, and other similar debts	
Yes	Other. Specify Charge Ac		
Part 3: List Others to Be Notified About a De	bt That You Already Listed		
5. Use this page only if you have others to be notified is trying to collect from you for a debt you owe to so have more than one creditor for any of the debts that notified for any debts in Parts 1 or 2, do not fill out of	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency	here. Similarly, if you
Name and Address	On which entry in Part 1 or Part 2 did yo	_	
Capital One Po Box 30281		Part 1: Creditors with Priority Unsecured Clai	
Salt Lake City, UT 84130	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Deptartment Store National Bank/Macy's Po Box 8218		☐ Part 1: Creditors with Priority Unsecured Clai ☐ Part 2: Creditors with Nonpriority Unsecured	
Mason, OH 45040			
	Last 4 digits of account number		
Name and Address LVNV Funding/Resurgent Capital	On which entry in Part 1 or Part 2 did yo Line 4.6 of (Check one):	u list the original creditor?  Part 1: Creditors with Priority Unsecured Clai	ms
C/o Resurgent Capital Services		Part 2: Creditors with Nonpriority Unsecured	Claims
Greenville, SC 29602	Last 4 digits of account number		
N	0 1:1 1:5 0 14 5 10 1:1	Part Control	
Name and Address  LVNV Funding/Resurgent Capital	On which entry in Part 1 or Part 2 did yo Line <b>4.7</b> of ( <i>Check one</i> ):	u list the original creditor? $\square$ Part 1: Creditors with Priority Unsecured Clai	me
C/o Resurgent Capital Services		Part 2: Creditors with Nonpriority Unsecured	
Greenville, SC 29602		ranz. Croalists with Heliphority Grissourou	Olamo
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did yo	•	
Midland Fund 320 East Big Beaver		Part 1: Creditors with Priority Unsecured Clair	
Troy, MI 48083		Part 2: Creditors with Nonpriority Unsecured	Claims
•	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Midland Fund	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claim	ms
320 East Big Beaver	ı	Part 2: Creditors with Nonpriority Unsecured	Claims
Troy, MI 48083	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
Midland Fund	_	Part 1: Creditors with Priority Unsecured Clai	
320 East Big Beaver Troy, MI 48083		Part 2: Creditors with Nonpriority Unsecured	Claims
	Last 4 digits of account number		

Official Form 106 E/F

Debtor 1 Stephanie Nicole Walker	Pg 28 01 65	Case number (if known)
Name and Address Midland Fund 320 East Big Beaver Troy, MI 48083	On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Naviet Po Box 9635 Wilkes Barre, PA 18773	On which entry in Part 1 or Part 2 did y Line 4.12 of (Check one):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Second Round, LP 4150 Freidrich Lane Austin, TX 78744	On which entry in Part 1 or Part 2 did y Line 4.13 of ( <i>Check one</i> ):	/ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Syncb/Car Care Carx C/o Po Box 965036 Orlando, FL 32896	On which entry in Part 1 or Part 2 did y Line 4.15 of ( <i>Check one</i> ):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Target Po Box 673 Minneapolis, MN 55440	On which entry in Part 1 or Part 2 did y Line 4.16 of ( <i>Check one</i> ):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address United States Attorney 111 South 10th St. 20th Floor Saint Louis, MO 63102	On which entry in Part 1 or Part 2 did y Line <b>2.1</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
June 20013, MO 00102	Last 4 digits of account number	
Name and Address Wf/Fmg Po Box 14517 Des Moines, IA 50306	On which entry in Part 1 or Part 2 did y Line <b>4.17</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 4,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 4,000.00
				Total Claim
T. ( )	6f.	Student loans	6f.	\$ 22,793.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 19,722.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 42,515.00

Fill in this infor	rmation to identify your	case:	ry 23 01 03	
Debtor 1	Stephanie Nicole	Walker		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2	,				
2.2	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.3				<del></del>	
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

			Pa 30 of 65		
Fill in this	information to identify your				
Debtor 1	Ctanbania Nicola	Wellson			
Deptor 1	Stephanie Nicole First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI		
Case numb	per				☐ Check if this is an
,					amended filing
Official	Form 106H				
		1.4			
Sched	ule H: Your Cod	ebtors			12/15
	and case number (if known) you have any codebtors? (If			e as a codebtor.	
_					
■ No					
☐ Yes					
Arizona  No.	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. . Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ates and territories include
in line Form 1 out Co	2 again as a codebtor only i	f that person is a guarar Form 106E/F), or Sched	itor or cosigner. Make	sure you have listed the c 06G). Use Schedule D, Sch	ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill or to whom you owe the debt nat apply:
3.1				Schedule D, line	
1	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
	City	State	ZIP Code		
3.2	Mana			Schedule D, line	
ı	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
(	City	State	ZIP Code		

Schedule H: Your Codebtors

ГШ	in this information to identify your c	ase:							
Del	otor 1 Stephanie N	icole Walker			_				
	btor 2 puse, if filing)				_				
Uni	ited States Bankruptcy Court for the	: EASTERN DISTRICT	OF MISSOURI		_				
	se number nown)		-			Check if this is:  An amende  A supplementation	d filing ent showing	g postpetition	chapter
0	fficial Form 106I					MM / DD/ Y		mownig date.	
	chedule I: Your Inc	ome				MIM / DD/ Y	YYY		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	r spouse is not filing wi	ith you, do not inclu	de inforn	natio	on about your spo	use. If mo	re space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ing spouse	
	If you have more than one job,	Employment status*	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Tech Support						
	Include part-time, seasonal, or self-employed work.	Employer's name	Spectrum						
	Occupation may include student or homemaker, if it applies.	Employer's address	PO BOX 790086 Saint Louis, MO						
		How long employed the	<u> </u>		for	Additional Emplo	yment Info	ormation	
Par	rt 2: Give Details About Mor	•							
	mate monthly income as of the d	ate you file this form. If y	you have nothing to re	eport for a	any I	ine, write \$0 in the	space. Inc	lude your nor	n-filing
	use unless you are separated.		-						
spou If yo			ombine the information	n for all e	mplo	oyers for that perso	n on the lir	nes below. If y	ou need
spou If yo	use unless you are separated. ou or your non-filing spouse have mo		ombine the information	n for all e	mplo	For Debtor 1	For Dek	nes below. If y otor 2 or ng spouse	ou need
spou If yo	use unless you are separated. ou or your non-filing spouse have mo	this form.  ry, and commissions (be	efore all payroll	n for all e 2.	mplo		For Dek	otor 2 or	ou need
spou If yo more	use unless you are separated.  ou or your non-filing spouse have more space, attach a separate sheet to  List monthly gross wages, sala	this form.  ry, and commissions (becalculate what the month)	efore all payroll			For Debtor 1	For Dek	otor 2 or ng spouse	vou need

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Stephanie Nicole Walker	_	(	Case n	number ( <i>if ki</i>	nown)				
					For I	Debtor 1		For	Debtor 2	2 or	
									-filing sp		
	Cop	by line 4 here	4.		\$	4,284	4.87	\$		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	483	3.71	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50	Э.	\$		1.33	\$		N/A	
	5d.	Required repayments of retirement fund loans	50	d.	\$	137	7.89	\$		N/A	
	5e.	Insurance	56	Э.	\$	74	1.79	\$		N/A	
	5f.	Domestic support obligations	5f		\$	(	0.00	\$		N/A	
	5g.	Union dues	50	g.	\$	(	0.00	\$		N/A	
	5h.	Other deductions. Specify: FSA	5h	า.+	\$	12	5.02	+ \$		N/A	
		Resumed Federal Tax Withholding at 10%	_		\$	426	6.83	\$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,559	9.57	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,72	5.30	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88		\$		5.13	\$		N/A	
	8b.	Interest and dividends	8k	Э.	\$	(	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 80	2.	\$		0.00	\$		N/A	
	8d.	Unemployment compensation	80		\$		0.00	\$_		N/A	
	8e.	Social Security	86		\$		0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f	:	\$	(	0.00	\$		N/A	
	8g.	Pension or retirement income	80		\$		0.00	\$		N/A	
	8h.	Other monthly income. Specify:	8h	า.+	\$	(	0.00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [	\$	12	5.13	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,850.43	1 6		N/A	= \$	2,850.43
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ <sub>-</sub>		.,000.40	•   •		14/4	-  • —	2,000.40
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not ecify:	dep						chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certallies							12.	\$	2,850.43
											income
13.	Do ; ■ □	you expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	.?								
	_										

Official Form 106l Schedule I: Your Income page 2

Debtor 1	Stephanie Nicole Walker	Case number (if known)
----------	-------------------------	------------------------

# Official Form B 6l Attachment for Additional Employment Information

Debtor	
Occupation	Owner
Name of Employer	Joiner & Walker LLC
How long employed	
Address of Employer	2169 Orbitt Dr.
	Saint Louis, MO 63136

Official Form 106I Schedule I: Your Income page 3

Fill	in this information to identify your case:						
Deb	tor 1 Stephanie Nicole Walker		Check	if this is:			
			□ A	n amended filing			
	tor 2buse, if filing)			supplement show 3 expenses as of t	ring postpetition chapter		
(Spt	ouse, ii iiiiiig)		1,	s expenses as on t	rie following date.		
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOU	RI	N	IM / DD / YYYY			
Cas	e number						
(If kı	nown)						
	W						
	fficial Form 106J						
	chedule J: Your Expenses				12/15		
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo nber (if known). Answer every question.						
Par							
1.	Is this a joint case?						
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?						
	□ No						
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses f	for Separate House	hold of Debto	r 2.			
2.	Do you have dependents? ■ No						
		Dependent's relati	onshin to	Dependent's	Does dependent		
	Do not list Debtor 1 and Yes. Fill out this information for each dependent	Debtor 1 or Debtor		age	live with you?		
	Do not state the				□ No		
	dependents names.				☐ Yes		
					□ No		
					☐ Yes		
					□ No		
					☐ Yes		
					□ No		
_					☐ Yes		
3.	Do your expenses include expenses of people other than yourself and your dependents?						
Par	t 2: Estimate Your Ongoing Monthly Expenses						
exp	imate your expenses as of your bankruptcy filing date unless yo senses as of a date after the bankruptcy is filed. If this is a supple blicable date.	u are using this fo emental <i>Schedul</i> e	orm as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report the form and fill in the		
Incl	lude expenses paid for with non-cash government assistance if	vou know					
the value of such assistance and have included it on Schedule I: Your Income							
(Off	ficial Form 106l.)			Tour expe			
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4. \$		745.00		
	If not included in line 4:						
	4a. Real estate taxes		4a. \$		0.00		
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00		
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		200.00		
	4d. Homeowner's association or condominium dues		4d. \$		0.00		
5.	Additional mortgage payments for your residence, such as hom	ne equity loans	5. \$		0.00		

Stephanie Nicole Walker	Case number (if known)	
. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	300.00
6b. Water, sewer, garbage collection	6b. \$	90.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	110.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	410.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	75.00
D. Personal care products and services	10. \$	110.00
. Medical and dental expenses	11. \$	50.00
2. <b>Transportation.</b> Include gas, maintenance, bus or train fare.	Π. Ψ	30.00
Do not include car payments.	12. \$	350.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	50.00
Charitable contributions and religious donations	14. \$	0.00
5. Insurance.	· <del></del>	
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	155.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	·	
Specify: ppt	16. \$	20.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report a	<u> </u>	
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	. 18. \$	0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form or on Sch		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
. Other: Specify:	21. +\$	0.00
Coloulata vaux manthly avacaca		
2. Calculate your monthly expenses	Φ.	0.005.00
22a. Add lines 4 through 21.	\$	2,665.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	2,665.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,850.43
23b. Copy your monthly expenses from line 22c above.	23b\$	2,665.00
200. Copy your monthly expenses nom line 220 above.	200Ψ	2,000.00
23c. Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$	185.43
4. Do you expect an increase or decrease in your expenses within the year after y		
For example, do you expect to finish paying for your car loan within the year or do you expect yo	ur mortgage payment to incre	ease or decrease because o
modification to the terms of your mortgage?		
■ No		
☐ Yes. Explain here:		

Fill in thi	is information to identify your	case:			
Debtor 1	Stephanie Nicole				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	filing) First Name	Middle Name	Last Name		
United St	States Bankruptcy Court for the:	EASTERN DISTRICT (	OF MISSOURI		
Case nur	mber				
(if known)					☐ Check if this is an
					amended filing
	<u>l Form 106Dec</u> aration About a	an Individual	l Debtor's Sc	hedules	12/15
	g money or property by fraud i both. 18 U.S.C. §§ 152, 1341, 1 Sign Below		kruptcy case can result II	n fines up to \$250,000,	or imprisonment for up to 20
Did	you pay or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
	No				
П	Yes. Name of person			Attach Bankru	ptcy Petition Preparer's Notice,
_				Declaration, and Signature (Official Form 119)	
	er penalty of perjury, I declare they are true and correct.	that I have read the sun	nmary and schedules filed	d with this declaration	and
Y	/s/ Stanbania Nicola Walka		Х		
_	/s/ Stephanie Nicole Walke Stephanie Nicole Walker	ı	Signature of	Debtor 2	
	Signature of Debtor 1		Oignature of		
	Date January 31, 2020		Date		
	January 31, 2020				

	in this inforn	nation to identify you	case:							
De	btor 1	Stephanie Nicole	e Walker Middle Name	Last Name						
	btor 2 buse if, filing)	First Name	Middle Name	Last Name						
		nkruptcy Court for the:	EASTERN DISTRICT OF							
•		maproy Countries and								
_	se number					heck if this is an mended filing				
St Be a	as complete a	of Financial		are filing together, both are	ankruptcy equally responsible for sup					
		n). Answer every ques Petails About Your Ma	stion. arital Status and Where You	Lived Before						
1.	What is your	current marital statu	ıs?							
	☐ Married ■ Not mar	ried								
2.	During the last 3 years, have you lived anywhere other than where you live now?									
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .					
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
<b>3.</b> stat					ity property state or territory co, Texas, Washington and W					
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	fficial Form 106H).						
Pa	rt 2 Explai	n the Sources of You	r Income							
4.	Fill in the tota	l amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,773.72	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Debtor 1 Stephanie Nicole Walker Pg 38 of 65 Case number (if known)

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross inco (before dec exclusions)	luctions and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December	31, 2019 )	■ Wages, commissions, bonuses, tips		\$51,205.15	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	:	\$42,404.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
5.	Include in and other winnings.  List each	come regard public bene If you are fil	dless of wheth fit payments; ling a joint cas the gross inco	e during this year or the two er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	amples of otherest; dividends you received to	r income are a ; money collect ogether, list it o	alimony; child supp cted from lawsuits; only once under De	royalties; an ebtor 1.	
				D. 1			D.14		
				Debtor 1 Sources of income Describe below.	Gross inco each source (before dec exclusions)	ce luctions and	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ayments You	Made Before You Filed for	Bankruptcy				
6.	Are eithe ☐ No.	Neither D	ebtor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu- personal, family, or househol	umer debts. C	onsumer debi	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the	90 days befo Go to line 7	re you filed for bankruptcy, di	d you pay any	creditor a tota	al of \$6,825* or mo	re?	
		□ Yes	paid that cre	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	nts for domesti	c support obli			
		* Subject	to adjustment	on 4/01/22 and every 3 years	s after that for	cases filed on	or after the date o	f adjustment	i.
	Yes.			r both have primarily consure you filed for bankruptcy, di		creditor a tota	al of \$600 or more?	1	
		□ No.	Go to line 7						
		■ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.					
	Creditor	's Name an	d Address	Dates of payme	ent Tot	al amount	Amount you still owe	Was this	payment for
	Attn: Co	orrespond	ncial Corpo lence Dept l; Suite 200 TX 75234	ration	;	\$2,100.00	\$93,389.00	■ Mortga □ Car □ Credit ( □ Loan R □ Supplie	Card

Debtor 1 Stephanie Nicole Walker Pg 39 of 65 Case number (if known)

7.	Within 1 year before you filed for bankrupt: Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.  No	artners; relatives of any gen control, or owner of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt: List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title					t or custody
	Case number					
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address			oreclosed, garnis Date	hed, attached	d, seized, or levied?  Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possessi	taken		efit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  No  Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	0 per person'	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					

Deb	tor 1	Stephanie Nicole Walker		Pg 40 of 65	Case number (	if known)	
14.		n 2 years before you filed for bankro No Yes. Fill in the details for each gift or c			utions with a tota	I value of more than	\$600 to any charity?
	Gifts more Char	s or contributions to charities that tethan \$600 rity's Name ress (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	d	Dates you contributed	Value
15.	Withi or ga	List Certain Losses  n 1 year before you filed for bankru mbling?	ptcy or	since you filed for bankruptcy, o	did you lose anyt	hing because of thef	it, fire, other disaste
	Desc	Yes. Fill in the details.  cribe the property you lost and the loss occurred	Include	be any insurance coverage for to the amount that insurance has pa ace claims on line 33 of Schedule A	id. List pending	Date of your loss	Value of property los
	consi	n 1 year before you filed for bankru ulted about seeking bankruptcy or p de any attorneys, bankruptcy petition p	preparin	ng a bankruptcy petition?			rty to anyone you
	_	No Yes. Fill in the details.					
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Y	ou'	Description and value of any partransferred	property	Date payment or transfer was made	Amount o paymen
	Tose 1088 Sain	cano & Wilson Law LLC 80 Baur Blvd nt Louis, MO 63132 rts@twlawstl.com		Filing Fee - \$310.00 Credit Report - \$40.00		1/31/2020	\$350.00
	prom	n 1 year before you filed for bankru ised to help you deal with your crec ot include any payment or transfer that	ditors o	r to make payments to your cred	your behalf pay o litors?	r transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.					
	_	on Who Was Paid		Description and value of any partners transferred	property	Date payment or transfer was made	Amount o paymen
18.	Withi	n 2 years before you filed for bankr	uptcy, d	lid you sell, trade, or otherwise	transfer any prop	erty to anyone, othe	r than property

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

☐ Yes. Fill in the details.

Person Who Received Transfer
Address

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Person's relationship to you

Date transfer was made paid in exchange

#### Filed 01/31/20 Entered 01/31/20 14:36:13 Main Document Case 20-40540 Doc 1 Pg 41 of 65

Debtor 1 Stephanie Nicole Walker

Case number (if known)

19.	beneficiary? (These are often called asset-prote		y property to a	a seir-setti	ed trust or similar device	or wnich you are a						
	Yes. Fill in the details.											
	Name of trust	Description and v	alue of the pro	operty tran	sferred	Date Transfer was made						
Par	List of Certain Financial Accounts, Insti	ruments, Safe Deposit	t Boxes, and S	storage Un	its							
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	nts; certificate	s of depos								
	Yes. Fill in the details.											
		Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer						
21.												
	■ No											
	Yes. Fill in the details.											
	Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)				e the contents	Do you still have it?						
22.	_											
	■ No □ Yes. Fill in the details.											
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)		Describe	e the contents	Do you still have it?						
Par	t 9: Identify Property You Hold or Control fo	or Someone Else										
23.	Do you hold or control any property that som for someone.	eone else owns? Incli	ude any prope	rty you bo	rrowed from, are storing f	or, or hold in trust						
	No											
	Yes. Fill in the details.											
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	e the property	Value						
Par	t 10: Give Details About Environmental Infor	mation										
For	the purpose of Part 10, the following definition	ns apply:										
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groun	• .								
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	•	environmental	law, whet	her you now own, operate	e, or utilize it or used						
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic hazardous material, pollutant, contaminant, or similar term.												

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case number (if known)

Debtor 1 Stephanie Nicole Walker

24.	Has any governmental unit notified you tha	t you may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
		ZIP Code)		
25.	Have you notified any governmental unit of	any release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adr	ministrative proceeding under any envi	ronmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or	Connections to Any Business		
27.	Within 4 years before you filed for bankrup	tcv. did vou own a business or have an	v of the following connections to any	/ business?
	'	in a trade, profession, or other activity,	,	
	■ A member of a limited liability comp	pany (LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership	,, ,	,	
		ecutive of a corporation		
	☐ An owner of at least 5% of the votin	-		
	■ No. None of the above applies. Go to I	Part 12.		
	Yes. Check all that apply above and fill	I in the details below for each business		
	Business Name	Describe the nature of the business	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or ITIN.
	Joiner & Walker LLC	Event Planning	Dates business existed EIN:	
	2169 Orbitt Dr.	Event Planning		
	Saint Louis, MO 63136		From-To 2/2006 - Present	
28.	Within 2 years before you filed for bankruptinstitutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Inclu	ude all financial
	No			
	Yes. Fill in the details below.	Date leaved		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Debtor 1 Stephanie Nicole Walker Pg 43 of 65 Case number (if known)

Part 12: Sign Below	
	Affairs and any attachments, and I declare under penalty of perjury that the answers statement, concealing property, or obtaining money or property by fraud in connection 100, or imprisonment for up to 20 years, or both.
/s/ Stephanie Nicole Walker	
Stephanie Nicole Walker	Signature of Debtor 2
Signature of Debtor 1	
Date January 31, 2020	Date
Did you attach additional pages to Your Statement of I	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	, , ,
□ Yes	
Did you pay or agree to pay someone who is not an att	torney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person Attach the Bankruptcy Pe	etition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:						
Debtor 1	Stephanie Nicole Wal	ker				
Debtor 2 (Spouse, if filing)						
United States B	Sankruptcy Court for the:	Eastern District of Missouri				
Case number (if known)						

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
<ul><li>1. Disposable income is not determined under</li><li>11 U.S.C. § 1325(b)(3).</li></ul>								
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
☐ 3. The commitment period is 3 years.								
4. The commitment period is 5 years.								
☐ Check if this is an amended filing								

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

au	uii	ional pages, write your name and case number	<b>,</b> .	Kilowiij.							
P	art	1: Calculate Your Average Monthly Income									
Γ.	1.	What is your marital and filing status? Check or	ne d	only.							
		■ Not married. Fill out Column A, lines 2-11.									
		☐ Married. Fill out both Columns A and B, lines 2	-11								
	10 th	I in the average monthly income that you received fro 1(10A). For example, if you are filing on September 15, the 6 6 months, add the income for all 6 months and divide the ouses own the same rental property, put the income from	e 6-	month per al by 6. Fill	iod would I in the re	be Ma sult. Do	arch 1 throu o not includ	ugh Aud de any i	gust 31. If the amount m	ount of your monthly incon ore than once. For examp	ne varied during le, if both
								Colui Debt		Column B Debtor 2 or non-filing spouse	
:	2.	Your gross wages, salary, tips, bonuses, overtipayroll deductions).	ime	, and co	mmissi	ons (b	efore all	\$	4,430.25	\$	
;	3.	<b>Alimony and maintenance payments.</b> Do not incolumn B is filled in.	lud	e paymei	nts from	a spo	use if	\$	0.00	\$	
	4.	All amounts from any source which are regular of you or your dependents, including child sup from an unmarried partner, members of your hous and roommates. Do not include payments from a syou listed on line 3.	<b>po</b> i eho	r <b>t.</b> Include Id, your c	e regula: depende	r contr nts, pa	ributions arents,	\$	0.00	\$	
!	5.	Net income from operating a business, profession, or farm		Debtor	1						
		Gross receipts (before all deductions)	\$			32.12	_				
		Ordinary and necessary operating expenses	-\$		25	6.99	_				
		Net monthly income from a business, profession, or farm	\$		12	25.13	Copy here ->	\$	125.13	\$	
(	3.	Net income from rental and other real property		Debtor							
		Gross receipts (before all deductions)		\$	0.00						
		Ordinary and necessary operating expenses		<b>-</b> \$	0.00						
		Net monthly income from rental or other real prope	rtv	\$	0.00	Cop	y here ->	\$	0.00	\$	

**Stephanie Nicole Walker** Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 4.555.38 4,555.38 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 4,555.38 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 4,555.38 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> 4,555.38

Debtor 1	Stephanie Nicole Walker	Case number (if known)		_
	Multiply line 15a by 12 (the number of months in a year).		<b>x</b> 12	_
15	o. The result is your current monthly income for the year for this part of the form.		\$54,664.56	-

Debtor 1 Stephanie Nicole Walker Case number (if known)

16	. Calculate the median family income that applies to y	ou. Follow these steps:		
	16a. Fill in the state in which you live.	MO		
	16b. Fill in the number of people in your household.	1		
	16c. Fill in the median family income for your state and s To find a list of applicable median income amounts	, go online using the link specified in		\$48,212.00
17	instructions for this form. This list may also be avail . How do the lines compare?	able at the bankruptcy clerk's office	•	
	17a. Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N			
	17b. Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calculyour current monthly income from line 14 all	lation of Your Disposable Income		
Par	Calculate Your Commitment Period Under 11	J.S.C. § 1325(b)(4)		
18.	Copy your total average monthly income from line 1	1		\$ 4,555.38
19.	<b>Deduct the marital adjustment if it applies.</b> If you are contend that calculating the commitment period under 1 spouse's income, copy the amount from line 13.			
	19a. If the marital adjustment does not apply, fill in 0 on	line 19a.	-:	\$
	19b. Subtract line 19a from line 18.			\$4,555.38_
20.	Calculate your current monthly income for the year.	Follow these steps:		
	20a. Copy line 19b			\$4,555.38_
	Multiply by 12 (the number of months in a year).			<b>x</b> 12
	20b. The result is your current monthly income for the year	ear for this part of the form		\$54,664.56
	20c. Copy the median family income for your state and	size of household from line 16c		\$ 48,212.00
	21. How do the lines compare?			
	Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by the court, on the top o	of page 1 of this form, check b	oox 3, The commitment
	■ Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	ess otherwise ordered by the court	on the top of page 1 of this f	form, check box 4, The
Par	t 4: Sign Below			
	By signing here, under penalty of perjury I declare that the	ne information on this statement and	d in any attachments is true a	and correct.
)	/ /s/ Stephanie Nicole Walker			
	Stephanie Nicole Walker Signature of Debtor 1			
	Date <b>January 31, 2020</b>			
	MM / DD / YYYY			
	If you checked 17a, do NOT fill out or file Form 122C-2.	ain farms. On line 22 of that far		na faran Bar d 4 - bees
	If you checked 17b, fill out Form 122C-2 and file it with the	nis form. On line 39 of that form, co	by your current monthly incon	ne from line 14 above.

					_		
Fill	n this inf	ormation to ide	entify your case:				
Deb	tor 1	Stephanie N	licole Walker				
	tor 2 ouse, if filir	ng)					
Unit	ed States	Bankruptcy Cou	rt for the: Eastern Distric	et of Missouri			
	e number nown)				☐ Chec	ck if this is an amend	ded filing
	ial Form 1 apter		ılation of Your	<sup>r</sup> Disposable I	ncome		04/19
		form, you will ı Pe <i>riod</i> (Official		oy of Chapter 13 Statem	ent of Your Current Monthl	y Income and Calcul	ation of
spac	e is need	ed, attach a sep		Include the line numbe	ether, both are equally resp r to which additional inform		
Part	1: Ca	alculate Your D	eductions from Your Inco	ome			
th	e questic	ns in lines 6-15		rds, go online using the	or certain expense amounts link specified in the separa		
e	cpenses if	they are higher	than the standards. Do not	t include any operating ex	ense. In later parts of the forr cpenses that you subtracted for s income in line 13 of Form 1	rom income in lines 5	
lf	your expe	nses differ from	month to month, enter the	average expense.			
N	ote: Line r	numbers 1-4 are	not used in this form. The	se numbers apply to infor	mation required by a similar f	orm used in chapter 7	cases.
5.	The nu	umber of people	e used in determining yo	our deductions from inco	ome		
	plus th	e number of any	cople who could be claimed additional dependents wh n your household.		rederal income tax return, mber may be different from	1	
N	ational St	andards	You must use the IRS N	National Standards to ans	wer the questions in lines 6-7	<b>7</b> .	
6.			ther items: Using the num		d in line 5 and the IRS Natior	nal \$	727.00
7.	the dol people	llar amount for o who are 65 or o	ut-of-pocket health care. T	he number of people is see have a higher IRS allow	entered in line 5 and the IRS N plit into two categoriespeopl vance for health car costs. If y e 22.	e who are under 65 ar	nd

Pg 49 of 65 Stephanie Nicole Walker Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 55.00 Copy here=> \$ 55.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f \$ 55.00 Copy total here=> 55.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 488.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 979.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Home Point Financial Corporation** 745.00 Сору Repeat this amount 745.00 745.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 234.00 234.00 or rent expense). If this number is less than \$0, enter \$0. here=>

Official Form 122C-2

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Debtor 1 Stephanie Nicole Walker Case number (if known)

11.	Loca	al transportation expenses: Check the number of vehic	les for which you claim a	an owner	ship or operating	g expense.	
	□ 0	. Go to line 14.					
	<b>■</b> 1	. Go to line 12.					
	□ 2	or more. Go to line 12.					
12.		icle operation expense: Using the IRS Local Standards rating expenses, fill in the <i>Operating Costs</i> that apply for the contraction of the contract of the con					190.00
13.	You	icle ownership or lease expense: Using the IRS Local may not claim the expense if you do not make any loan of than two vehicles.					
Ve	hicle	Describe Vehicle 1: 2012 Nissan Altima 150	,000 miles				
13a.	. Own	ership or leasing costs using IRS Local Standard		\$	508.00		
13b.	. Aver	rage monthly payment for all debts secured by Vehicle 1.		_			
	Do r	not include costs for leased vehicles.					
	are o	alculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 mont cruptcy. Then divide by 60.		t			
		Name of each creditor for Vehicle 1	Average monthly payment				
		Consumer Portfolio Svc	\$ 103.23				
		Total Average Monthly Payment	\$103.23	Copy here =>	-\$	Repeat this amount on line 33b.	
13c.		Vehicle 1 ownership or lease expense tract line 13b from line 13a. if this number is less than \$0,	enter \$0	. \$_	404.77	Copy net Vehicle 1 expense here => \$	404.77
Ve	hicle	2 Describe Vehicle 2:					
13d.	. Own	ership or leasing costs using IRS Local Standard			0.00		
13e.		rage monthly payment for all debts secured by Vehicle 2. ed vehicles.	Do not include costs for	r			
		Name of each creditor for Vehicle 2	Average monthly payment				
			\$				
				Сору		Repeat this	
		Total average monthly payment	\$	here => -\$	0.0	amount on line	
13f.	Net '	Vehicle 2 ownership or lease expense		_		Copy net	
	Subt	tract line 13e from line 13d. if this number is less than \$0,	enter \$0	\$_	0.00	Vehicle 2 expense here => \$	0.00
14.		lic transportation expense: If you claimed 0 vehicles lic Transportation expense allowance regardless of v	, 0		,	n the	0.00
15.	also	itional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in w claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the ap				0.00

Debtor 1 Stephanie Nicole Walker Case number (if known)

Oth	er Nece	ssary Expenses	In addition to the expense of the following IRS categorie		s listed above	, you are allowed your monthly expenses	for	
16.	<b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  Do not include real estate, sales, or use taxes.						\$	555.04
17.			The total monthly payroll ded	luctions th	at your job re	quires, such as retirement		
		utions, union dues, a include amounts tha		b, such a	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.					\$	0.00	
19.	adminis	strative agency, sucl	The total monthly amount the has spousal or child suppor nest due obligations for sp	t payment	s.	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.	_		hly amount that you pay for	education	that is either	required:		
	_	condition for your jo		C - 1-11-11-17	a a de Para de ca	artina ta anno 9 a bha faoi at ar 9 an ann 2 ann	¢	0.00
21	•	. , ,	, , , ,		•	ation is available for similar services. sitting, daycare, nursery, and preschool.	\$	0.00
21.			or any elementary or second		•	sitting, daycare, nursery, and prescribor.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.					\$	0.00	
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						+\$	0.00
24.		l <b>of the expenses a</b> es 6 through 23.	Illowed under the IRS expe	ense allov	vances.		\$	2,653.81
Add	itional I	Expense Deduction	These are additional of Note: Do not include a					
25.	insurar					<b>ises.</b> The monthly expenses for health ly necessary for yourself, your spouse, o	r	
	Health	insurance		\$	60.59			
	Disabili	ty insurance		\$	0.00			
	Health	savings account	•	+ \$	125.02			
	Total			\$	185.61	Copy total here=>	\$	185.61
	Do you	actually spend this No. How much do y						
		Yes		\$				
26.	continu	e to pay for the reas susehold or member	sonable and necessary care	and supp no is unab	ort of an elder le to pay for s	e actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the		
	safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.  By law, the court must keep the nature of these expenses confidential.					\$	0.00	

ebtor 1	Stephanie Nicole Walker	Ca	se number (if know	n)			
	Additional home energy costs. Your homine 8.	e energy costs are included in your insurance	e and operatin	g expens	ses on		
	f you believe that you have home energy on the fill in the excess amount of home er	osts that are more than the home energy costergy costs	sts included in	expenses	s on line	Э	
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must iry.	show that the	additiona	I	\$_	0.00
9	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly pendent children who are younger than 18 y	ears old to atte	t more thend a priv	an ate or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why th	e amoun	t		
*	Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or a	fter the date of	adjustm	ent.	\$	0.00
ŀ	Additional food and clothing expense. Thigher than the combined food and clothing han 5% of the food and clothing allowance	he monthly amount by which your actual food allowances in the IRS National Standards. T s in the IRS National Standards.	d and clothing That amount ca	expenses annot be	s are more		
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		oarate			
,	You must show that the additional amount	claimed is reasonable and necessary.				\$	0.00
	Continuing charitable contributions. The nstruments to a religious or charitable orga	amount that you will continue to contribute i nization. 11 U.S.C. § 548(d)(3) and (4).	n the form of c	ash or fin	ancial		
I	Do not include any amount more than 15%	of your gross monthly income.				\$_	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.				\$	185.61
Dedu	ctions for Debt Payment						
33. Fo	or debts that are secured by an interest ans, and other secured debt, fill in lines	in property that you own, including home	mortgages, v	ehicle			
To		ent, add all amounts that are contractually du	ue to each sec	ured			
	Mortgages on your home						ge monthly
33a.	Copy line 9b here				=>	payme \$	745.00
	Loans on your first two vehicles					·—	140.00
33b.	•				=>	\$	103.23
33c.						\$	0.00
					=>	Ψ	0.00
33d. Name	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt	ir	oes payr clude tax r insuran	ces		
	-NONE-					ď	
				- 100		\$	
				] No			
				] Yes		\$	
				] No			
				] Yes	+	\$	
					Сору		
33e	Total average monthly payment. Add lines	33a through 33d	\$	348.23	total here	ļ.,	848.23

ebtor 1 Ste	phanie Nicole Walker	·		Case	e numbei	r (if known)			
	y debts that you listed in liner property necessary for yo				,				
☐ No.	Go to line 35.								
■ Yes	s. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ssession of your property (							
Name of th	ne creditor	Identify property that sec	ures the deb	t	Total o	cure amount		nthly c ount	ure
Home Po	oint Financial tion	2169 Orbitt Dr. Saint Saint Louis County	t Louis, M	\$		1,200.00	÷ 60 = \$		20.00
				\$ \$			÷ 60 = \$ _ ÷ 60 = +\$		
				Ψ			Copy		
				Total	\$	20.00	total here=>	\$	20.00
				L					
■ Yes	<ul> <li>Fill in the total amount of a ongoing priority claims, su</li> <li>Total amount of all past-o</li> </ul>	ch as those you listed in lin			\$	4,000.00	÷ 60	\$	66.67
36. Project	ted monthly Chapter 13 plai	n payment			\$	200.00	-		
Office of the Execution To find a	t multiplier for your district as of the United States Courts (for ecutive Office for United State a list of district multipliers that incle e instructions for this form. This lis	or districts in Alabama and I s Trustees (for all other dis udes your district, go online usi	North Caroli tricts). ng the link sp	na) or by ecified in the	x	5.70	-		
Average	e monthly administrative expe	ense			\$_	11.40	Copy total here=> \$		11.40
	all of the deductions for deb nes 33e through 36.	t payment.						\$	946.30
Total Dedu	ictions from Income								
	of the allowed deductions.								
	line 24, All of the expenses a	llowed under IRS	\$	2,653.81	_				
Copy I	line 32, All of the additional e.		\$	185.61	_				
Copy I	line 37, All of the deductions	for debt payment	+\$	946.30					
			\$	3,785.72		opy total here=>	<b>&gt;</b> \$		3,785.72

Debtor 1	Stephanie Nic	cole walker		Cas	se numb	per (# known)		
Part 2:	Determine Yo	our Disposable Income Under 11	U.S.C. § 1325(b)	(2)				
		rrent monthly income from line 1 Current Monthly Income and Ca			,		\$	4,555.38
<b>chi</b> l disa rece	Idren. The mont ability payments eived in accorda	bly necessary income you receively average of any child support part of a dependent child, reported in Fince with applicable nonbankruptcy bended for such child.	yments, foster ca art I of Form 122	are payments, or 2C-1, that you	\$	0	0.00	
emր in 1	ployer withheld fi	retirement deductions. The month rom wages as contributions for qua b)(7) plus all required repayments of C. § 362(b)(19).	lified retirement p	olans, as specified	l \$_	449	0.22	
42. <b>Tot</b>	al of all deducti	ons allowed under 11 U.S.C. § 70	7(b)(2)(A). Copy	line 38 here =	> \$	3,785	5.72	
exp thei	enses and you h r expenses. You	cial circumstances. If special circunave no reasonable alternative, des must give your case trustee a detadocumentation for the expenses.	cribe the special	circumstances an	nd			
Describ	be the special c	ircumstances		Amount of expe	ense			
_	Resumed Fed	deral Tax Withholding at 10%		\$ 42	8.48			
_				\$				
_				\$				
			Total \$	428.48	Cop	oy e=> \$	428.48	
44. <b>Tot</b>	al adjustments.	Add lines 40 through 43.		=>	\$	4,663.42	Copy here=> -\$	4,663.42
	-	nthly disposable income under §	<b>1325(b)(2).</b> Sub	tract line 44 from l	line 39	).	\$	-108.04
Part 3:	Change in Inc	come or Expenses						
hav time you	re changed or are e your case will b r filed your petition	or expenses. If the income in Forre virtually certain to change after the open, fill in the information below in, check 122C-1 in the first column I in when the increase occurred, an	e date you filed y	vour bankruptcy pe the wages reporte he second column	etition ed inc ı, expl	and during the reased after		
Form	Line	Reason for change		Date of change	•	Increase or decrease?	Amount of cha	ange
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase	\$	
☐ 1220 ☐ 1220 ☐ 1220	<u></u> C-1					☐ Decrease☐ Increase☐ Decrease☐	\$ 	

Debtor 1 Stephanie Nicole Walker Case number (if known)

art 4:	Sign Below	
	<u> </u>	
1	By signing here, under penalty of perjury you	declare that the information on this statement and in any attachments is true and correct.
	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
Х	/s/ Stephanie Nicole Walker	
	Stephanie Nicole Walker	
	Signature of Debtor 1	
	•	
Date	January 31, 2020	
	MM / DD / YYYY	
	, 22 ,	

Debtor 1 Stephanie Nicole Walker

Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2019 to 12/31/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Wages** Year-to-Date Income:

Starting Year-to-Date Income: \$24,623.65 from check dated 6/30/2019. Ending Year-to-Date Income: \$51,205.15 from check dated 12/31/2019.

Income for six-month period (Ending-Starting): \$26,581.50 .

Average Monthly Income: \$4,430.25 .

#### Line 5 - Income from operation of a business, profession, or farm

Source of Income: **Self Employment** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	07/2019	\$409.00	\$426.35	\$-17.35
5 Months Ago:	08/2019	\$37.50	\$0.00	\$37.50
4 Months Ago:	09/2019	\$750.00	\$346.59	\$403.41
3 Months Ago:	10/2019	\$41.99	\$24.00	\$17.99
2 Months Ago:	11/2019	\$578.73	\$280.59	\$298.14
Last Month:	12/2019	\$475.50	\$464.40	\$11.10
_	Average per month:	\$382.12	\$256.99	
	_		Average Monthly NET Income:	\$125.13

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Eastern District of Missouri

In	re Stephanie Nicole Walker		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	of the petition in bankruptcy	y, or agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		\$	1,350.00	
	Prior to the filing of this statement I have received			0.00	
	Balance Due		<b></b> \$	1,350.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	☐ Debtor ☐ Other (specify): ARAG Le	egal			
4.	■ I have not agreed to share the above-disclosed compensation	ation with any other person	n unless they are mem	bers and associates of	f my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspe	cts of the bankruptcy	case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, stateme</li> <li>c. Representation of the debtor at the meeting of creditors at</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to redure affirmation agreements and applications</li> <li>522(f)(2)(A) for avoidance of liens on house</li> </ul>	ent of affairs and plan which and confirmation hearing, a uce to market value; ex as needed; preparatio	ch may be required; and any adjourned hea kemption planning	urings thereof;	filing of
6.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any adver				
	(	CERTIFICATION			
this	I certify that the foregoing is a complete statement of any ags bankruptcy proceeding.	greement or arrangement fo	or payment to me for r	epresentation of the d	lebtor(s) in
	January 31, 2020	/s/ Michael Toso	eano		
_	Date	Michael Toscan			
		Signature of Attori			
		Toscano & Wils 10880 Baur Blvo			
		Saint Louis, MO	<del></del>		
			Fax: (314) 692-864	6	

Name of law firm

#### United States Bankruptcy Court Eastern District of Missouri

In re	Stephanie Nicole Walker		Case No.	
		Debtor(s)	Chapter	13
	VERIFICATION OF CREDITOR MATRIX			
contai compl	The above named debtor(s) hereby certifies/certify under penalty of perjury that the attached list ining the names and addresses of my creditors (Matrix), consisting of _3_ page(s) and is true, correct and lete.			
		/s/ Stephanie Nicole V		
		Stephanie Nicole Wal	ker	
		Debtor		
		Dated: _January 31	, 2020	

Americash Loans PO Box 1728 Des Plaines, IL 60016

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Po Box 30281 Salt Lake City, UT 84130

Cash For Whatever 6160 N. Cicero Chicago, IL 60646

Consumer Portfolio Svc Attn: Bankruptcy Po Box 57071 Irvine, CA 92619

Consumer Portfolio Svc 19500 Jamboree Rd Irvine, CA 92612

Deptartment Store National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Deptartment Store National Bank/Macy's Po Box 8218
Mason, OH 45040

Evergreen Services PO Box 834 Lac Du Flambeau, WI 54538

Home Point Financial Corporation Attn: Correspondence Dept 11511 Luna Road; Suite 200 Farmers Branch, TX 75234

Home Point Financial Corporation 4849 Greenville Avenue Dallas, TX 75206

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

LVNV Funding/Resurgent Capital C/o Resurgent Capital Services Greenville, SC 29602

Midland Fund Attn: Bankruptcy 350 Camino De La Reine Ste 100 San Diego, CA 92108

Midland Fund 320 East Big Beaver Troy, MI 48083

Missouri Department of Revenue Taxation Division PO BOX 854 Jefferson City, MO 65105

Naviet Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 19773

Naviet Po Box 9635 Wilkes Barre, PA 18773

Second Round, LP Attn: Bankruptcy Dept Po Box 41955 Austin, TX 78704

Second Round, LP 4150 Freidrich Lane Austin, TX 78744

Speedycash.Com 88-Mo P.O. Box #780408 Wichita, KS 67278

Syncb/Car Care Carx Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/Car Care Carx C/o Po Box 965036 Orlando, FL 32896 Target
Attn: Bankruptcy
Po Box 9475
Minneapolis, MN 55440

Target Po Box 673 Minneapolis, MN 55440

United States Attorney 111 South 10th St. 20th Floor Saint Louis, MO 63102

Wf/Fmg Attn: Bankruptcy Po Box 10438 Mac F8235-02f Des Moines, IA 50306

Wf/Fmg Po Box 14517 Des Moines, IA 50306